

Nebraska Legislature

PERFORMANCE AUDIT

REQUEST FORM

Instructions:

- Please describe your concern or interest as specifically as possible.
- Return this form to: **Martha Carter, Legislative Audit Office, Centre Terrace Building, 1225 L Street, #502, Lincoln, NE 68509.**

Date _____

Requester _____

Detailed description of Performance Audit request _____

(Requester may attach additional sheets/separate letter)